

Meeting w/ R.C.

2/19

Rosario Gambino ~~43~~ 53 years old - Terminal  
Island  
24 ~~months~~ denied 7 CI

- 1980 - acquitted →  
③ 1984 - convicted → <sup>NO.</sup> { pled guilty - drugs -  
5 co-defendants  
45 years - }

distribution of 'one kilo' of heroin

① 1980 - charged in U.S. ~~43~~ acquitted

② Charged and convicted in Italy - absentee  
"They" said he had an atty -  
He says - offendant - never had an  
attorney -

{ 52 - 80 months - present in office set  
100+ months ~~43~~ eligible for parole

Category 7 or 8 -

↓  
initial setting

↓  
charged during sentence → parole  
residence set

→ release date at 148 months - July 16, 1990

20 supervised parole

→ one min - in fact - "shot" - still  
in prison

12 12  
12 148  
12 24  
24 4

CLINTON LIBRARY  
PHOTOCOPY

EXHIBIT

61

3 co-defendants released - 34 years  
1 co-defendant - parole pending - "Gennaro"  
(~~Benito's~~ sister married)

2  
A Notices of Action → Parole Commission - denied

① first <sup>trial</sup> - organized crime →  
"proven" was not a relative of Carlo Gambino

② appealed → second hearing on  
"organized crime" charge - govt. "admitted"  
no ties of organized crime - same  
examination - sub raised Italy  
charge → ~~"proven"~~ conviction - → Second  
Notice of Action - he was "kingpin" of  
Group -

## Documents

① Paolo Gambino Data - 11/20/84

② ~~Prosecution~~ Report - '84

③ First Hearing - ~~Benito~~ <sup>Benito</sup>

④ Spatola Parole Hearing -

{ - Antonio Gambino

{ - Antonio Spatola

⑤ Notice of Action - Antonio Gambino

⑥ Notice of Action - Anthony Spatola

CLINTON LIBRARY  
PHOTOCOPY

(7/13/94)

⑦ Notice of Act - Erasmo Gambino

⑧ Notice of Act - ~~Er~~ - Rosario Gambino

⑨ Second Hearing → on organized crime  
issue & "There is no evidence by  
a preponderance of the evidence that  
RG was a member of organized  
crime -

⑩ ~~Letter~~ Memo →

Michael Sloner - counsel → Mike Gambino  
↳ improper -

Roger Chert -

Gambino  
(  
- Erasmo - 8 to 6  
- Spatola - 8 to 7  
- R. Gambino - 7 to 8  
)

CLINTON LIBRARY  
PHOTOCOPY

PAR1L 540\*23 \*  
AG 001 \*

SENTENCE MONITORING  
COMPUTATION DATA  
AS OF 03-19-2001

\* 03-19-2001  
\* 14:40:02

EGNO...: 06235-050 NAME: GAMBINO, ROSARIO

BI NO.....: [REDACTED] DATE OF BIRTH: [REDACTED]  
RS1.....: LOS/A-HLD ARS2.....: TRM/FED WRIT  
INIT.....: SUNSET QUARTERS.....: I05-902L  
DETAINEES.....: NO NOTIFICATIONS: NO

THE FOLLOWING SENTENCE DATA IS FOR THE INMATE'S CURRENT COMMITMENT.  
THE INMATE IS PROJECTED FOR RELEASE: 03-14-2007 VIA PRESUM PAR

-----CURRENT JUDGMENT/WARRANT NO: 010 -----

COURT OF JURISDICTION.....: NEW JERSEY  
DOCKET NUMBER.....: 84-98  
JUDGE.....: LACEY  
DATE SENTENCED/PROBATION IMPOSED: 12-06-1984  
DATE WARRANT ISSUED.....: N/A  
DATE WARRANT EXECUTED.....: N/A  
DATE COMMITTED.....: 03-09-1985  
HOW COMMITTED.....: US DISTRICT COURT COMMITMENT  
PROBATION IMPOSED.....: NO  
SPECIAL PAROLE TERM.....: 20 YEARS

	FELONY ASSESS	MISDMNR ASSESS	FINES	COSTS
COMMITTED.....				
AMOUNT.....	\$00.00	\$00.00	\$105,000.00	\$00.00
AMOUNT PAID..	\$00.00	\$00.00	\$00.00	\$00.00
DATE PAID....				
DT INDG OATH:				
DATE OTHER..				

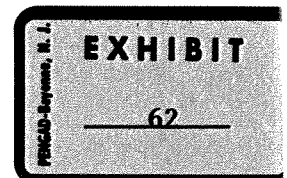
RESTITUTION...: PROPERTY: SERVICES: AMOUNT: \$00.00

-----CURRENT OBLIGATION NO: 010 -----

OFFENSE CODE....: 382  
OFF/CHG: 21USC 841(A)(1) KNOWINGLY DID POSSESS HEROIN W/I DIST; DID  
DIST HEROIN; CONSP TO DIST HEROIN; USE OF COMM FACIL TO DIST

SENTENCE PROCEDURE.....: 4205(A) REG ADULT-ORIG TERM GRTR THAN 1YR  
5H SENTENCE IMPOSED/TIME TO SERVE.: 45 YEARS

G0002 MORE PAGES TO FOLLOW . . .



USPC/Gambino-00010

5H PAR1L 540\*23 \*  
PA 002 OF 002 \*

SENTENCE MONITORING  
COMPUTATION DATA  
AS OF 03-19-2001

\* 03-19-2001  
\* 14:40:02

REGNO...: 06235-050 NAME: GAMBINO, ROSARIO

-----CURRENT COMPUTATION NO: 010 -----

COMPUTATION 010 WAS LAST UPDATED ON 08-31-1999 AT TRM AUTOMATICALLY

THE FOLLOWING JUDGMENTS, WARRANTS AND OBLIGATIONS ARE INCLUDED IN  
CURRENT COMPUTATION 010: 010 010

DATE COMPUTATION BEGAN.....: 12-06-1984  
TOTAL TERM IN EFFECT.....: 45 YEARS  
TOTAL TERM IN EFFECT CONVERTED...: 45 YEARS

JAIL CREDIT.....	FROM DATE	THRU DATE
	03-16-1984	12-05-1984

TOTAL JAIL CREDIT TIME.....: 265  
TOTAL INOPERATIVE TIME.....: 0  
STATUTORY GOOD TIME RATE.....: 10  
TOTAL SGT POSSIBLE.....: 5400  
PAROLE ELIGIBILITY.....: 03-15-1994  
STATUTORY RELEASE DATE.....: 06-02-2014  
TWO THIRDS DATE.....: 03-15-2014  
180 DAY DATE.....: 09-16-2028  
EXPIRATION FULL TERM DATE.....: 03-15-2029

PRESUMPTIVE PAROLE DATE.....: 03-14-2007  
NEXT PAROLE HEARING DATE.....: 01-00-2001  
TYPE OF HEARING.....: STATUTORY INTERIM HEARING

PROJECTED SATISFACTION DATE.....: 03-14-2007  
PROJECTED SATISFACTION METHOD...: PRESUM PAR

REMARKS.....: NOA DATED 04-04-95; CONTINUE TO EXPIRATION.

S0055 NO PRIOR SENTENCE DATA EXISTS FOR THIS INMATE

67

ITEM 1  
AMERICAN AIRLINES WASHINGTON DC \$75.00

Cardmember Account No. ██████████	Transaction Date 03/16/99	Ticket Number 00106193702454	
Passenger Name CORNWELL/LISA		Ticketing Airline AMERICAN AIRLINES	
Issuer Name AMERICAN AIRLINES		Issuer Address WASHINGTON	
From	Carrier	Class	Transaction Amount
To:	YY	YY	\$75.00
To:	YY	YY	Amexco Use Only
To:	YY	YY	075001041
To:			000290
To:			00 076000
MISC CHARGE ORDER/PREPAID TICKET AUTHORITY S/E # 7992403089			

ITEM 2  
AMERICAN AIRLINES WASHINGTON DC \$75.00

Cardmember Account No. ██████████	Transaction Date 03/16/99	Ticket Number 00106193702616	
Passenger Name MCLELLAND/MONA		Ticketing Airline AMERICAN AIRLINES	
Issuer Name AMERICAN AIRLINES		Issuer Address WASHINGTON	
From	Carrier	Class	Transaction Amount
To:	YY	YY	\$75.00
To:	YY	YY	Amexco Use Only
To:	YY	YY	075001048
To:			000290
To:			00 076000
MISC CHARGE ORDER/PREPAID TICKET AUTHORITY S/E # 7992403089			

ITEM 3  
CALL HOME AMERICA SOUTH FIELD MI \$4.25

Cardmember Account No. ██████████	Date of Charge 03/17/99	Reference Code 201755536	Approval Code 68
Service Establishment and Location CALL HOME AMERICA SOUTH FIELD MI			
Record of Charge  COMMUNICATIONS  ROC NUMBER 0004711313  S/E # 3216547307			
TOTAL CHARGE AMOUNT			\$4.25

ITEM 4  
AMERICAN AIRLINES WASHINGTON DC \$250.00

Cardmember Account No. ██████████	Transaction Date 03/19/99	Ticket Number 00107515478655	
Passenger Name CLINTON/ROGER		Ticketing Airline AMERICAN AIRLINES	
Issuer Name AMERICAN AIRLINES		Issuer Address WASHINGTON	
From	Carrier	Class	Transaction Amount
To:	XX	XX	\$250.00
To:	XX	XX	Amexco Use Only
To:	XX	XX	078001513
To:			000290
To:			00 079000
MISC CHARGE ORDER/PREPAID TICKET AUTHORITY S/E # 7992403089			

ITEM 5  
AMERICAN AIRLINES WASHINGTON DC \$622.00

Cardmember Account No. ██████████	Transaction Date 03/19/99	Ticket Number 00121597931460	
Passenger Name GAMBINO/THOMAS		Ticketing Airline AMERICAN AIRLINES	
Issuer Name AMERICAN AIRLINES		Issuer Address WASHINGTON	
From LOS ANGELES CA	Carrier	Class	Transaction Amount
To: DALLAS/FT WORTH TX	AA	VE	\$622.00
To: WASHINGTON NAT'L D	AA	VE	Amexco Use Only
To: DALLAS/FT WORTH TX	AA	VE	078001451
To: LOS ANGELES CA			000290
			00 079000
PASSENGER TICKET S/E # 7992403089			

ITEM 6  
AMERICAN AIRLINES WASHINGTON DC \$832.00

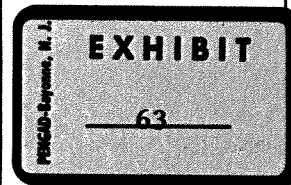
Cardmember Account No. ██████████	Transaction Date 03/19/99	Ticket Number 00121597944955	
Passenger Name CLINTON/ROGER		Ticketing Airline AMERICAN AIRLINES	
Issuer Name AMERICAN AIRLINES		Issuer Address WASHINGTON	
From LOS ANGELES CA	Carrier	Class	Transaction Amount
To: DALLAS/FT WORTH TX	AA	V2	\$832.00
To: WASHINGTON NAT'L D	AA	V2	Amexco Use Only
To: DALLAS/FT WORTH TX	AA	V2	078001502
To: LOS ANGELES CA			000290
			00 079000
PASSENGER TICKET S/E # 7992403089			

ITEM 7  
AMERICAN AIRLINES WASHINGTON DC \$184.00

Cardmember Account No. ██████████	Transaction Date 03/19/99	Ticket Number 00121597945003	
Passenger Name CLINTON/ROGER		Ticketing Airline AMERICAN AIRLINES	
Issuer Name AMERICAN AIRLINES		Issuer Address WASHINGTON	
From DALLAS/FT WORTH TX	Carrier	Class	Transaction Amount
To: LITTLE ROCK AR	AA	W2	\$184.00
To: DALLAS/FT WORTH TX	XX	XX	Amexco Use Only
To:	XX	XX	078001503
To:			000290
To:			00 079000
PASSENGER TICKET			

ITEM 8  
AMERICAN AIRLINES WASHINGTON DC \$300.00

Cardmember Account No. ██████████	Transaction Date 03/23/99	Ticket Number 00107515580822	
Passenger Name CLINTON/ROGER		Ticketing Airline AMERICAN AIRLINES	
Issuer Name AMERICAN AIRLINES		Issuer Address WASHINGTON	
From	Carrier	Class	Transaction Amount
To:	XX	XX	\$300.00
To:	XX	XX	Amexco Use Only
To:	XX	XX	082001363
To:			000290
To:			00 083000
MISC CHARGE ORDER/PREPAID TICKET AUTHORITY			


 /PEN01090//  
/  
/ ST PG 3 OF 5 /  
/ PG-0029

ANNA GAMBINO  
1015 GAYLEY AVENUE #1238  
LOS ANGELES CA 90024

90-7036/3222  
55

106

Date 9-29-97

Pay to the  
Order of

*Odgie Music*

\$ 50,000<sup>00</sup>

*Fifty thousand Dollars*

123707-0456-093099-007(116)

Dollars

Security features  
are included.  
Details on back.

**FIDELITY FEDERAL BANK** FSB  
1460 Westwood Blvd., Westwood, CA 90024  
Merchant Verification 1-900-555-7878

21-10959-06517

NHY

For

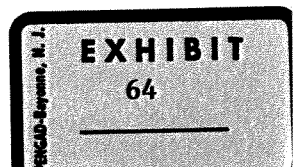
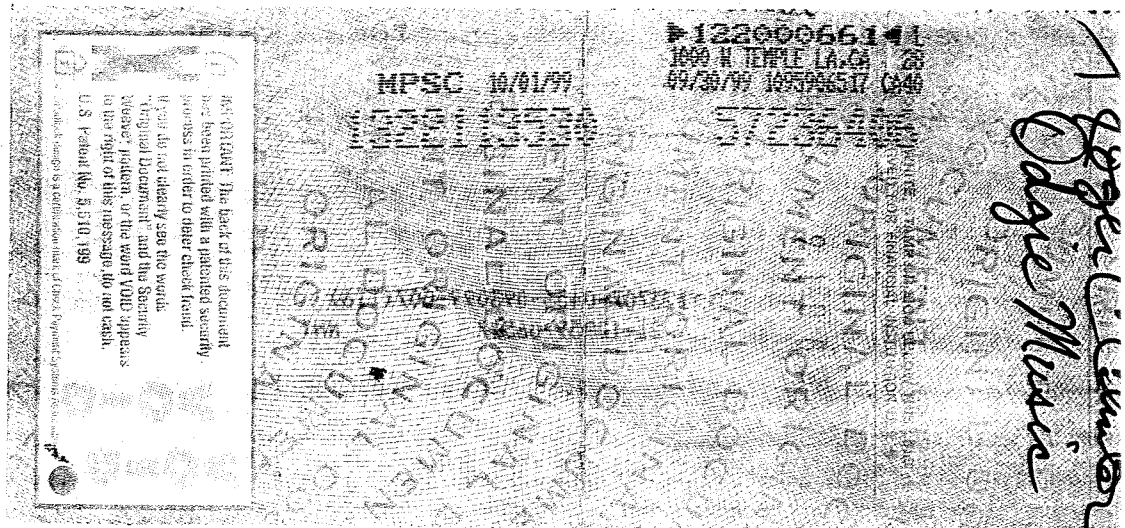
*Anna Gambino*

MP

⑆322270369⑆0106 ⑈055 0034637⑈ ⑈0005000000⑈

© Charles American

GUARDIAN® SAFETY BLUE W



STATEN ISLAND SAVINGS  
81 WATER STREET  
STATEN ISLAND, NY 10314

27632

17121-2200

STATEN ISLAND SAVINGS BANK  
CLOSING ACCOUNT A  
15 BEACH STREET  
STATEN ISLAND NY 10304

00027632

DATE 04/30/99 AMOUNT TWENTY-SEVEN THOUSAND EIGHT HUNDRED EIGHTY-NINE AND 97 / 100 Dollars

04/30/99

\*\*\*\$27,889.97

CASHIER'S CHECK

*[Signature]*

263 Woods of Arden Rd #600743

STATEN ISLAND SAVINGS  
81 WATER STREET  
STATEN ISLAND, NY 10314

27631

17121-2200

STATEN ISLAND SAVINGS BANK  
CLOSING ACCOUNT A  
15 BEACH STREET  
STATEN ISLAND, NY 10304

00027631

ONE HUNDRED THOUSAND AND XX / 100 Dollars

DATE

AMOUNT

04/30/99

\*\*\*\$100,000.00

CASHIER'S CHECK

*[Signature]*

263 Woods of Arden Rd #600743

STATEN ISLAND SAVINGS  
81 WATER STREET  
STATEN ISLAND, NY 10314

27630

17121-2200

STATEN ISLAND SAVINGS BANK  
CLOSING ACCOUNT A  
15 BEACH STREET  
STATEN ISLAND NY 10304

00027630

ONE HUNDRED THOUSANT AND XX / 100 Dollars

DATE

AMOUNT

4/30/99

\*\*\*\$100,000.00

CASHIER'S CHECK

*[Signature]*

263 Woods of Arden Rd #600743

EXHIBIT

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ACCOUNTHOLDER(S) ☐ TEMPORARY ☐ DATA ENTRY ACCOUNT NUMBER

1 GAMBINO: ANNA  
2 GAMBINO: GIUSEPPA  
3

MO. SIGS OPENED/  
DATE OPENED. R&Q. VERIF. BY

05/11/99 1

THE UNDERSIGNED APPLY FOR A **CHECKING** ACCOUNT AT FIDELITY FEDERAL BANK AND AGREE TO THE RULES SET BY THE BANK AND ACKNOWLEDGE RECEIPT OF A COPY OF THE BANK'S ACCOUNT INFORMATION AND DISCLOSURE AND SCHEDULE OF FEES AND SERVICES. THE BANK RESERVES THE RIGHT TO HOLD FUNDS ON DEPOSITED ITEMS PER REGULATION CC. THE ACCOUNT INDICATED ABOVE SHALL BE OWNED AS A/JAN

### JOINT TENANTS ACCOUNT

INDICATE WHICH ACCOUNTHOLDERS NAME WILL BE USED FOR TAX REPORTING: **NAME 1**  
Under penalties of perjury, the Accountholder indicated for tax reporting purposes certifies on (date) **NAME 1** that 1) the TIN provided is my correct TIN and 2) I am not subject to back-up withholding either because I have not been notified that I am subject to back-up withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me I am no longer subject to back-up withholding.

SIGNATURE	TIN/EIN
① <i>Anna Gambino</i>	156-80-9496
2 <i>Giuseppa Gambino</i>	103-46-9152
3	

SIG. LINE #	(1)	(2)	(3)
PRIMARY ID	[REDACTED]	[REDACTED]	
BIRTHDATE	[REDACTED]	[REDACTED]	
BIRTHPLACE	NEW YORK	ITALY	
MOTHER'S MIA. NAME	OMANO	GANDOLFO	
HOME PHONE	[REDACTED]	[REDACTED]	
BUS. PHONE	310 446 0784	310 446 0784	

BENEFICIARY(S)/OFFICER/SUCCESSOR CUSTODIAN NAME(S)	RELATIONSHIP/TITLE
1	
2	
3	
4	
1	
2	
3	
4	

EXHIBIT

66

## MAILING ADDRESS

## HOME ADDRESS

SAFE

## OPENING/CURRENT INFORMATION

ACCOUNT BALANCE 160,000.00	PLAN TYPE ICA	TERM	INTEREST RATE	DEBIT CARD NAME CODE 00
INTEREST DISPOSITION/ CREDIT	CYCLE	TRANSFER INTEREST TO ACCOUNT NO.	MAIL CODE 0	
DATE OF CHANGE	REASON			
CHEX SYSTEMS — ACCOUNTHOLDER # 1 <input type="checkbox"/> Record <input checked="" type="checkbox"/> No Record		CHEX SYSTEMS — ACCOUNTHOLDER # 2 <input type="checkbox"/> Record <input type="checkbox"/> No Record		

## CARD AUTHORIZATION

☐ By checking this box, I (we) hereby authorize Fidelity Fidelity Bank to issue a Master Money Debit Card(s) or Fidelity Express ATM Card(s), and a Personal Identification Number (PIN), and to link my (our) account(s) to my (our) MasterMoney Debit/ ATM Card(s). This Card(s) allows access to my (our) accounts by ATM, POS, and such other electronic services as are available in the future.

If the account(s) listed are owned jointly, all applicants will be jointly and severally liable for the use of the card(s).

CARD #	LINKED ACCOUNT #
--------	------------------

## ORGANIZATION/CORPORATE RESOLUTION

Resolved, that the funds of the organization are hereby to be deposited into an account in Fidelity Federal Bank FBS and that said Bank is authorized to act without further inquiry in accordance with writings bearing the signature(s) of the persons shown on the face hereof until it receives written notice that signature(s) are no longer authorized. The undersigned certify that this resolution is not a violation of the articles of incorporation or the bylaws of the organization and was adopted at a meeting of the Board held on \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_.

In witness whereof we have hereunto affixed our hand as President and Secretary of this organization.

PRESIDENT

DATE

SECRETARY

DATE

BO 1700 (9-04)



DIRECT INQUIRIES TO:

THE CONVENIENCE STATEMENT

FIDELITY FEDERAL BANK, FSB  
PO BOX 1631  
GLENDALE CA 91209-1631

818-241-0215 800-4-FIDELITY

## QUICK REFERENCE

PAGE	1	ACCOUNT NUMBER	[REDACTED]
ENCLOSURES		LAST STATEMENT DATE	05-11-99
		THIS STATEMENT DATE	05-31-99

ANNA GAMBINO  
[REDACTED]

055

## CHECKING ACCOUNT STATEMENT

BEGINNING BALANCE	DEPOSITS AND CREDITS	INTEREST EARNED	CHECKS AND DEBITS	SERVICE CHARGE	ENDING BALANCE	INTEREST EARNED Y.T.D.
.00	160,000.00	259.70	12.91		160,246.79	259.70

## CHECKING ACCOUNT [REDACTED] ACTIVITY

DATE	DEBITS	CREDITS	TRANSACTION DESCRIPTION
05-11		160,000.00	DEPOSIT
05-27	12.91		CK. PRINTING CHG
05-28		259.70	INTEREST PAID

AVERAGE DAILY BALANCE \$160009 MINIMUM BALANCE ON 05-27 \$159987.09

## DAILY CHECKING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
05-11	160000.00	05-27	159987.09	05-28	160246.79

ANNUAL PERCENTAGE YIELD EARNED

2.96%

FRAUD ALERT! DON'T DISCLOSE ACCOUNT OR OTHER INFO TO CALLERS  
POSING AS BANK EMPLOYEES ASKING YOU TO TRANSFER FUNDS INTO  
A SPECIAL BOND ACCOUNT DUE TO YEAR 2000 COMPUTER PROBLEMS.



DIRECT INQUIRIES TO:

THE CONVENIENCE STATEMENT

FIDELITY FEDERAL BANK, FSB  
PO BOX 1631  
GLENDALE CA 91209-1631☒ V

818-241-6215 800-4-FIDELITY

## QUICK REFERENCE

PAGE	1	ACCOUNT NUMBER	[REDACTED]
ENCLOSURES	2	LAST STATEMENT DATE	05-31-99
		THIS STATEMENT DATE	06-30-99

ANNA GAMBINO

055

## CHECKING ACCOUNT STATEMENT

BEGINNING BALANCE	DEPOSITS AND CREDITS	INTEREST PAID	CHECKS AND DEBITS	SERVICE CHARGE	ENDING BALANCE	INTEREST EARNED Y.T.D.
160,246.79		373.71	11,450.00		149,170.50	633.41

----- CHECKING ACCOUNT [REDACTED] ACTIVITY -----

CHECK	DATE	AMOUNT	CHECK	DATE	AMOUNT	CHECK	DATE	AMOUNT
0093	06-04	500.00	0094	06-14	2500.00			

DATE	DEBITS	CREDITS	TRANSACTION DESCRIPTION
06-04	2,300.00		WITHDRAWAL
06-14	2,000.00		WITHDRAWAL
06-18	3,700.00		WITHDRAWAL
06-21	450.00		WITHDRAWAL
06-30		373.71	INTEREST PAID

AVERAGE DAILY BALANCE \$153435 MINIMUM BALANCE ON 06-21 \$148796.79

## ----- DAILY CHECKING BALANCE -----

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
05-31	160246.79	06-14	152946.79	06-21	148796.79
06-04	157446.79	06-18	149246.79	06-30	149170.50

ANNUAL PERCENTAGE YIELD EARNED

3.00%

NEED A HOME LOAN NOW? WE'VE GOT THEM. FIXED, ADJUSTABLE,  
NON-CONFORMING-WHATEVER! YOU'LL GET GREAT RATES, VARYING  
TERMS & SUPER SERVICE. SEE YOUR LOCAL BRANCH FOR DETAILS.

\*\*\* B 01 \*\*\*

\*\*\* B 01 \*\*\*



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GLENDALE CA 91209-1631

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## QUICK REFERENCE

PAGE	1	ACCOUNT NUMBER	[REDACTED]
ENCLOSURES	2	LAST STATEMENT DATE	06-30-99
		THIS STATEMENT DATE	07-31-99

----

-----

ANNA GAMBINO  
GIUSEPPA GAMBINO

055

## CHECKING ACCOUNT STATEMENT

BEGINNING BALANCE	DEPOSITS AND CREDITS	INTEREST EARNED	CHECKS AND DEBITS	SERVICE CHARGE	ENDING BALANCE	INTEREST EARNED Y.T.D.
149,170.50	5,000.00	111.55	150,900.00		3,382.05	744.96

## CHECKING ACCOUNT [REDACTED] ACTIVITY

CHECK	DATE	AMOUNT	CHECK	DATE	AMOUNT
0101	07-26	1900.00	0102	07-23	20000.00

DATE	DEBITS	CREDITS	TRANSACTION DESCRIPTION
07-07	9,000.00		WITHDRAWAL
07-09	120,000.00		XFR TO 05530039825 9293
07-23		5,000.00	DEPOSIT
07-30		111.55	INTEREST PAID

AVERAGE DAILY BALANCE \$44290 MINIMUM BALANCE ON 07-26 \$3270.50

## DAILY CHECKING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
06-30	149170.50	07-09	20170.50	07-26	3270.50
07-07	140170.50	07-23	5170.50	07-30	3382.05

ANNUAL PERCENTAGE YIELD EARNED

3.01%

NEED A HOME LOAN NOW? WE'VE GOT THEM. FIXED, ADJUSTABLE,  
NON-CONFORMING-WHATEVER! YOU'LL GET GREAT RATES, VARYING  
TERMS & SUPER SERVICE. SEE YOUR LOCAL BRANCH FOR DETAILS.



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FIDELITY FEDERAL BANK, FSB  
PO BOX 1631  
GLENDALE CA 91209-1631☒ U

818-241-6215 800-4-FIDELITY

## QUICK REFERENCE

PAGE	1	ACCOUNT NUMBER	[REDACTED]
ENCLOSURES	2	LAST STATEMENT DATE	07-31-99
		THIS STATEMENT DATE	08-31-99

ANNA GAMBIHO  
GIUSEPPA GAMBIHO  
[REDACTED]

055

## CHECKING ACCOUNT STATEMENT

BEGINNING BALANCE	DEPOSITS AND CREDITS	INTEREST EARNED	CHECKS AND DEBITS	SERVICE CHARGE	ENDING BALANCE	INTEREST EARNED Y.T.D.
3,382.05		5.51	2,836.00		551.56	750.47

## CHECKING ACCOUNT [REDACTED] ACTIVITY

CHECK	DATE	AMOUNT	CHECK	DATE	AMOUNT	CHECK	DATE	AMOUNT
0103	08-17	1900.00	0105*	08-23	900.00			

DATE	DEBITS	CREDITS	TRANSACTION DESCRIPTION
08-18	18.00		NSF/UCF CHARGE
08-24	18.00		NSF/UCF CHARGE
08-31		5.51	INTEREST PAID

AVERAGE DAILY BALANCE \$2189 MINIMUM BALANCE ON 08-24 \$546.05

## DAILY CHECKING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
07-31	3382.05	08-18	1464.05	08-24	546.05
08-17	1482.05	08-23	564.05	08-31	551.56

ANNUAL PERCENTAGE YIELD EARNED

3.00%

NEED A HOME LOAN NOW? WE'VE GOT THEM. FIXED, ADJUSTABLE,  
NON-CONFORMING-WHATEVER! YOU'LL GET GREAT RATES, VARYING  
TERMS & SUPER SERVICE. SEE YOUR LOCAL BRANCH FOR DETAILS.



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GLENDALE CA 91209-1631

818-241-6215 800-4-FIDELITY

## QUICK REFERENCE

PAGE	1	ACCOUNT NUMBER	[REDACTED]
ENCLOSURES		LAST STATEMENT DATE	08-31-99
		THIS STATEMENT DATE	09-30-99

ANNA GAMBINO  
GIUSEPPA GAMBINO  
[REDACTED]

055

## CHECKING ACCOUNT STATEMENT

BEGINNING BALANCE	DEPOSITS AND CREDITS	INTEREST PAID	CHECKS AND DEBITS	SERVICE CHARGE	ENDING BALANCE	INTEREST EARNED Y.T.D.
551.56	50,000.00	5.40			50,556.96	755.87

## CHECKING ACCOUNT [REDACTED] ACTIVITY

DATE	DEBITS	CREDITS	TRANSACTION DESCRIPTION	
09-30		50,000.00	XFR FROM 5530039825	9409
09-30		5.40	INTEREST PAID	

AVERAGE DAILY BALANCE \$2218 MINIMUM BALANCE ON 08-31 \$551.56

## DAILY CHECKING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
08-31	551.56	09-30	50556.96		

ANNUAL PERCENTAGE YIELD EARNED

3.00%

NEED A HOME LOAN NOW? WE'VE GOT THEM. FIXED, ADJUSTABLE,  
NON-CONFORMING-WHATEVER! YOU'LL GET GREAT RATES, VARYING  
TERMS & SUPER SERVICE. SEE YOUR LOCAL BRANCH FOR DETAILS.



DIRECT INQUIRIES TO:

THE CONVENIENCE STATEMENT

FIDELITY FEDERAL BANK, FSB  
PO BOX 1631  
GLENDALE CA 91209-1631

Q U

818-241-6215 800-4-FIDELITY

QUICK REFERENCE

PAGE	1	ACCOUNT NUMBER	[REDACTED]
ENCLOSURES	1	LAST STATEMENT DATE	09-30-99
		THIS STATEMENT DATE	10-31-99

-----

ANNA GAMBINO  
GIUSEPPA GAMBINO  
[REDACTED]

055

CHECKING ACCOUNT STATEMENT

BEGINNING BALANCE	DEPOSITS AND CREDITS	INTEREST EARNED	CHECKS AND DEBITS	SERVICE CHARGE	ENDING BALANCE	INTEREST EARNED YTD
50,556.96		1.40	50,000.00		558.36	757.27

----- CHECKING ACCOUNT ACTIVITY -----

CHECK	DATE	AMOUNT	CHECK	DATE	AMOUNT	CHECK	DATE	AMOUNT
0106	10-01	50000.00						

DATE	DEBITS	CREDITS	TRANSACTION DESCRIPTION
10-29		1.40	INTEREST PAID

AVERAGE DAILY BALANCE \$556 MINIMUM BALANCE ON 10-01 \$556.96

----- DAILY CHECKING BALANCE -----

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
09-30	50556.96	10-01	556.96	10-29	558.36

ANNUAL PERCENTAGE YIELD EARNED 3.00%

NEED A HOME LOAN NOW? WE'VE GOT THEM. FIXED, ADJUSTABLE,  
NON-CONFORMING-WHATEVER! YOU'LL GET GREAT RATES, VARYING  
TERMS & SUPER SERVICE. SEE YOUR LOCAL BRANCH FOR DETAILS.



THE CONVENIENCE STATEMENT

FIDELITY FEDERAL BANK, FSB  
PO BOX 1631  
GLENDALE CA 91209-1631

818-241-6215 800-4-FIDELITY

QUICK REFERENCE

PAGE	1	ACCOUNT NUMBER	[REDACTED]
ENCLOSURES		LAST STATEMENT DATE	10-31-99
		THIS STATEMENT DATE	11-30-99

ANNA GAMBINO  
GIUSEPPA GAMBINO  
[REDACTED]

055

CHECKING ACCOUNT STATEMENT

BEGINNING BALANCE	DEPOSITS AND CREDITS	INTEREST EARNED	CHECKS AND DEBITS	SERVICE CHARGE	ENDING BALANCE	INTEREST EARNED Y.T.D.
558.36		1.00	559.36		.00	758.27

CHECKING ACCOUNT [REDACTED] ACTIVITY

DATE	DEBITS	CREDITS	TRANSACTION DESCRIPTION
11-23		1.00	INTEREST PAID
11-23	559.36		CLOSE ACCOUNT IN WITHDRAWAL
AVERAGE DAILY BALANCE		\$409	MINIMUM BALANCE ON 11-23 \$0.00

DAILY CHECKING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
10-31	558.36	11-23	.00		

ANNUAL PERCENTAGE YIELD EARNED 3.01%

NOW PUT ALL YOUR MONEY TO WORK! BASIC INTEREST CHECKING  
EARNS 3% ANNUAL PERCENTAGE YIELD (APY). ASK YOUR BRANCH  
FOR DETAILS ON HOW TO AVOID MONTHLY SERVICE FEES.

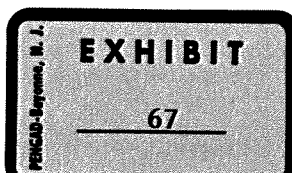
# Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower", as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when ☐ the income or assets of a person other than the "Borrower" (including the borrower's spouse) will be used as a basis for loan qualification or ☐ the income or assets of the Borrower's spouse will not be used as a basis for loan qualification, but his or her liabilities must be considered because the Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

I. TYPE OF MORTGAGE AND TERMS OF LOAN				Agency Case Number		Lender Case Number	
Mortgage applied for:		Interest Rate		No. of Months		Amortization Type	
<input type="checkbox"/> V.A. <input type="checkbox"/> Conventional <input type="checkbox"/> Other:		7.125%		360		<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Other (explain):	
<input type="checkbox"/> FHA <input type="checkbox"/> FmHA						<input type="checkbox"/> GPM <input checked="" type="checkbox"/> ARM (type):	
Amount		500,000		10/1			
II. PROPERTY INFORMATION AND PURPOSE OF LOAN							
Subject Property Address (street, city, state, ZIP)						No. of Units	
Legal Description of Subject Property (attach description if necessary)						Year Built	
Purpose of Loan				Property will be:			
<input type="checkbox"/> Purchase <input type="checkbox"/> Construction <input type="checkbox"/> Other (explain):				<input type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment			
<input checked="" type="checkbox"/> Refinance <input type="checkbox"/> Construction-Permanent							
Complete this line if construction or construction-permanent loan.							
Original Cost		Amount Existing Liens		(a) Present Value of Lot		(b) Cost of Improvements	
\$		\$		\$		\$	
Total (a + b)							
Complete this line if this is a refinance loan.							
Original Cost		Amount Existing Liens		Purpose of Refinance		Describe Improvements	
\$		\$ 200,000		Investment		<input type="checkbox"/> made <input type="checkbox"/> to be made	
				Cost: \$			
Title will be held in (with Names)				Manner in which Title will be held		Estate will be held in:	
Lisa Gambino				Solely		<input checked="" type="checkbox"/> Fee Simple	
Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain)						<input type="checkbox"/> Leasehold (show expiration date)	
Proceeds							

Borrower				Co-Borrower			
Borrower's Name (include Jr. or Sr. if applicable)				Co-Borrower's Name (include Jr. or Sr. if applicable)			
Lisa Gambino							
Social Security Number		Home Phone (incl. area code)		Social Security Number		Home Phone (incl. area code)	
<input type="checkbox"/> Married <input checked="" type="checkbox"/> Unmarried (include single, divorced, widowed)		Dependents (not listed by Co-Borrower) no. ages		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried (include single, divorced, widowed)		Dependents (not listed by Borrower) no. ages	
<input type="checkbox"/> Separated				<input type="checkbox"/> Separated			
Present Address (street, city, state, ZIP)		<input checked="" type="checkbox"/> Own <input type="checkbox"/> Rent		Present Address (street, city, state, ZIP)		<input type="checkbox"/> Own <input type="checkbox"/> Rent	
		3					
If residing at present address for less than two years, complete the following:							
Former Address (street, city, state, ZIP)				Former Address (street, city, state, ZIP)			
<input type="checkbox"/> Own <input type="checkbox"/> Rent				<input type="checkbox"/> Own <input type="checkbox"/> Rent			
Former Address (street, city, state, ZIP)				Former Address (street, city, state, ZIP)			
<input type="checkbox"/> Own <input type="checkbox"/> Rent				<input type="checkbox"/> Own <input type="checkbox"/> Rent			

Borrower				Co-Borrower			
Name & Address of Employer		<input type="checkbox"/> Self Employed		Name & Address of Employer		<input type="checkbox"/> Self Employed	
		Yrs. on this job				Yrs. on this job	
		Yrs. employed in this line of work/profession				Yrs. employed in this line of work/profession	
Position/Title/Type of Business		Business Phone (incl. area code)		Position/Title/Type of Business		Business Phone (incl. area code)	
If employed in current position for less than two years or if currently employed in more than one position, complete the following:							
Name & Address of Employer		<input type="checkbox"/> Self Employed		Name & Address of Employer		<input type="checkbox"/> Self Employed	
		Dates (from - to)				Dates (from - to)	
		Monthly Income				Monthly Income	
		\$				\$	
Position/Title/Type of Business		Business Phone (incl. area code)		Position/Title/Type of Business		Business Phone (incl. area code)	
Name & Address of Employer		<input type="checkbox"/> Self Employed		Name & Address of Employer		<input type="checkbox"/> Self Employed	
		Dates (from - to)				Dates (from - to)	
		Monthly Income				Monthly Income	
		\$				\$	
Position/Title/Type of Business		Business Phone (incl. area code)		Position/Title/Type of Business		Business Phone (incl. area code)	



Income				Combined Monthly Housing Expense	Present	Proposed
Gross Monthly Income	Borrower	Co-Borrower	Total			
Base Empl. Income *	\$	\$	\$	Rent	\$	
Overtime				First Mortgage (P&I)		\$
Bonuses				Other Financing (P&I)		
Commissions				Hazard Insurance		
Dividends/Interest				Real Estate Taxes		
Net Rental Income				Mortgage Insurance		
Other (Items completing as the notice in "describe other income," below)				Homeowner Assn. Dues		
				Other:		
Total	\$	\$	\$	Total	\$	\$

B/C	Describe Other Income	Notice: Alimony, child support, or separate maintenance income need not be revealed if the Borrower (B) or Co-Borrower (C) does not choose to have it considered for repaying this loan.	Monthly Amount
			\$

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-Borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise separate Statements and Schedules are required. If the Co-Borrower section was completed above, spouse, this Statement and supporting schedules must be completed about that spouse also.

ASSETS	Cash or Market Value	Liabilities and Pledged Assets. List the creditor's name, address and account number for all outstanding debt including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledge etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale real estate owned or upon refinancing of the subject property.
Description		
cash, deposit, investment, purchase held by:		

Fannie Mae Form 1003 10/92

## Schedule of Real Estate Owned (If additional properties are owned, use continuation sheet.)

List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):

Alternate Name	Creditor Name	Account Number
----------------	---------------	----------------

## VIII. DECLARATIONS

## IX. ACKNOWLEDGMENT AND AGREEMENT

Certification: I/We certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application.

☒ INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling, in order to monitor the Lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this Lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for.)

**CO-BORROWER**

Freddie Mac Form 65 10/92

Continuation Sheet/Residential Loan Application

Use this continuation sheet if you need more space to complete the Residential Loan Application. Mark B for Borrower or C for Co-Borrower.	Borrower:	Agency Case Number:
	Co-Borrower:	Lender Case Number:

I fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1001, et seq.

Borrower's Signature:	Date	Co-Borrower's Signature:	Date
		X	

ATT: Roberta Okun

Re: Gambino, Lisa  
Woods of Arden

Please reduce loan from  
500,000 to 499,000 as  
mortgage tax becomes greater for  
the 1,000. Please re-commit

Thank you

Ten Bugno

OK  
A.A.

To whom it may Concern 990317

I am getting this loan for  
an investment.

Thank You  
Lisa

# MEMORANDUM

TO: Marie Ragghianti  
Chief of Staff

FROM: Sharon Gervasoni  
DDAEO

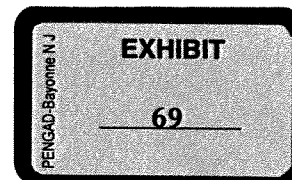
DATE: September 23, 1998

RE: Your request for advice dated September 16, 1998

I agree with your concern that the Commission handle Rosario Gambino's case in the same fair, impartial manner that it strives to handle all prisoners' cases. What properly belongs in the parole file is any material relating to the official decisionmaking and the official record of that process. The FBI's interest in Mr. Gambino (i.e., that he may be under investigation, for reasons unknown) does not rise to the level of substantial information that the Commission should or may consider in making a parole decision in Gambino's case. If in the future the Commission were to be informed that the investigation had yielded some concrete allegations of conduct by Mr. Gambino that would be relevant to his suitability for release on parole, that information would be properly part of the decisionmaking file. At this time, however, the mere fact that the FBI wished to review Mr. Gambino's file is not a matter that should be placed in the decisionmaking file. (Disclosure of information to the FBI is an intra-agency disclosure and is permissible under the Privacy Act. 5 U.S.C. §552a(b)(1). It is not a disclosure under a routine use.)

I have spoken with the hearing examiner currently doing the prehearing review in Mr. Gambino's case, and have concluded that his recusal is not necessary. Finally, there is no basis for continuing Mr. Gambino's case, as he has a statutory entitlement to his statutory interim hearing in a timely manner. Given that the Commission's prior decision in his case was that it be continued to a 15 year reconsideration hearing, there is adequate time for the FBI to inform the Commission in the event that their investigation yields information regarding Mr. Gambino that is relevant to whether he should be paroled.

In my view, the decisionmaking file should not include information regarding Roger Clinton's interest in the Rosario Gambino case. Mr. Clinton is not Mr. Gambino's representative and does not have a Privacy Act waiver from Mr. Gambino authorizing his access to Gambino's Privacy Act-protected file material. He has previously been invited to reduce his concerns about Gambino's case to a written document (e.g. a letter to Commissioner Simpson), so that his views can be



USPC/Gambino--00879



considered.<sup>1</sup> (Mr. Stover told him this during his telephone conversation with Mr. Clinton in 1996.) He has, to my knowledge, not taken this action, instead engaging in meetings with Commission staff which seem to me designed to influence the decisionmaking process outside of the official record (for example by complaining about allegedly rude treatment by Commission staff members). The fact that he may have attempted to influence the Commission's decisionmaking outside official decisionmaking channels need not become a part of the official decisionmaking record, and indeed in my opinion would potentially taint that record and make an impartial decision more difficult.<sup>2</sup> (In providing advice to Chairman (then Commissioner) Gaines in 1996 about whether he should or must recuse himself from Gambino's case, among my considerations were Commissioner Gaines' statements that he did not know Roger Clinton, that he had declined to speak to Mr. Clinton about a pending case and that he would make his decision solely on the record. If the record had at the time of decision contained Mr. Stover's memorandum regarding his conversation with Mr. Clinton, it would have defeated Commissioner Gaines' attempt to insulate himself from Mr. Clinton's ex parte communication, and potentially undermined the fairness of the decisionmaking process.)

I note the apparently contradictory language in the Commission's Procedures Manual, which states that "visits to the Commission's Office are summarized for the file in all cases." Procedures Manual §2.22-05. I would mention several things with respect to this provision. First, it has been in the Manual for a very long time, since before the advent of the Privacy Act. The provisions of the Privacy Act severely limit what information can be given to a member of the public regarding a prisoner without that person's express waiver of his privacy protection. The Privacy Act has vastly reduced the utility of visits to the Commission's office for persons who do not have such a waiver in hand, as Commission staff must refuse to discuss particulars of the case in which the visitor is interested. See discussion of Privacy Act at pp. 153-157 of the Manual. Second, there is no provision in the Commission's statute or rules entitling any member of the public to a meeting with Commission staff. "Interested parties opposing parole" may appear **at parole hearings** (i.e., as part of the **official** parole decisionmaking process) under circumstances specified in the Manual at paragraph 2.13-11. Finally, the Commission's statute requires it to consider, in making parole decisions, "such additional **relevant** information concerning the prisoner" as may be available. 18 U.S.C. §4207(5)(emphasis added). That Roger Clinton is interested in Mr. Gambino's case is not relevant to his suitability for parole under the criteria of 18 U.S.C. §4206. I think the best way to view the language in the Manual regarding visits is as a guideline for the usual case, but not as a straightjacket which would require the Commission to include something in the case

---

<sup>1</sup> The Commission's regulations provide that it may consider "such additional relevant information concerning the prisoner...as may be reasonably available" and state that "the Commission encourages the submission of relevant information concerning an eligible prisoner by interested persons".

<sup>2</sup> The Commission's regulations do not provide for meetings by members of the public or prisoners' representative with official decisionmakers (i.e., Commissioners).

file which is not relevant to its parole decision and which could taint the fairness or appearance of fairness of its decision.

Finally, I am not sure what you mean when you refer to an "interim protocol for handling sensitive cases". Perhaps we can discuss your proposal further so I can understand what you have in mind. Mr. Stover is currently working on the advice memorandum you reference.

BANK OF AMERICA CALIFORNIA  
FULL TRANSACTION REPORT

TJFULL

Run 26-OCT-1999 06:28 Page 81988  
For 25-OCT-1999

<<< TRN: 991025-034484 >>>

\*\*\*\* MESSAGE ENVELOPE \*\*\*\*

( Bank : CAL )

SRC:MWR CALLER: EXT: SND DATE:99/10/25  
RPT# AMT:100,000.00 CUR:USD TRDR#  
TEST: VAL:99/10/25 TYP:FTR/ FNDS:S CHG:DB:Y CD:Y COM:X CBL:X  
-----  
\*DBT D/ [REDACTED] CDT \*D/1095906517 ADV:LTR  
GERARD GUEZ ODGIE MUSIC

SEND:B/3852  
BANKAMERICA MTS CUSTOMER SVC 3854  
1850 GATEWAY BLVD  
8TH FLOOR  
CONCORD, CALIFORNIA  
SNDR REF NUM:BA REF940213  
REF NUM:991025ECCA0032MW  
ORIG:  
/ACCT/[REDACTED] GERARD GUEZ  
[REDACTED]  
[REDACTED]

\*\*\*\* MESSAGE TEXT \*\*\*\*

GCA141404 ECC0032  
XX TMTA  
.ECCA

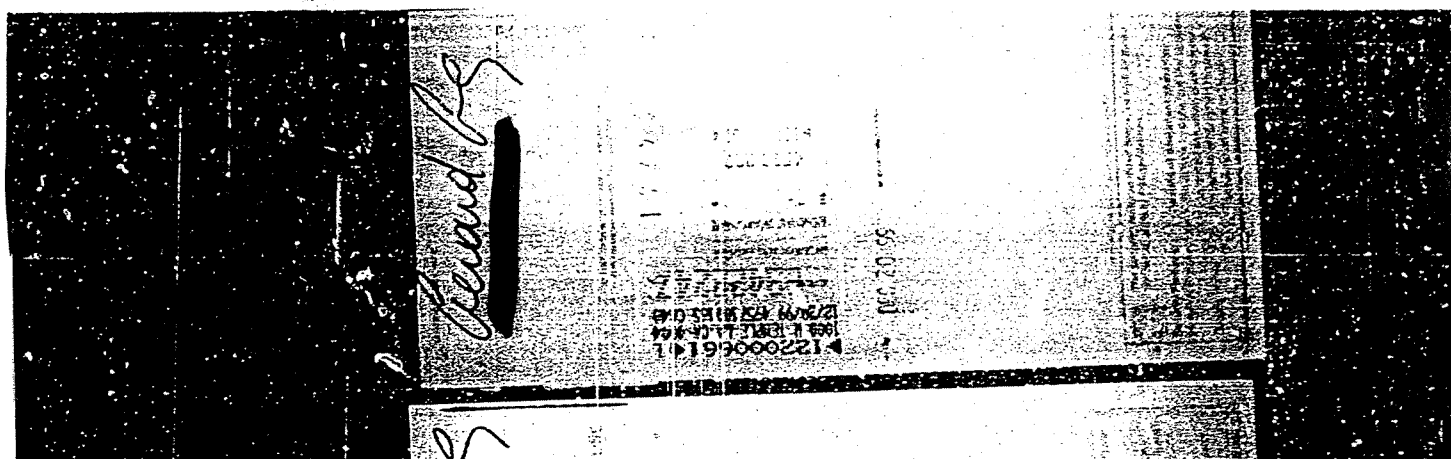
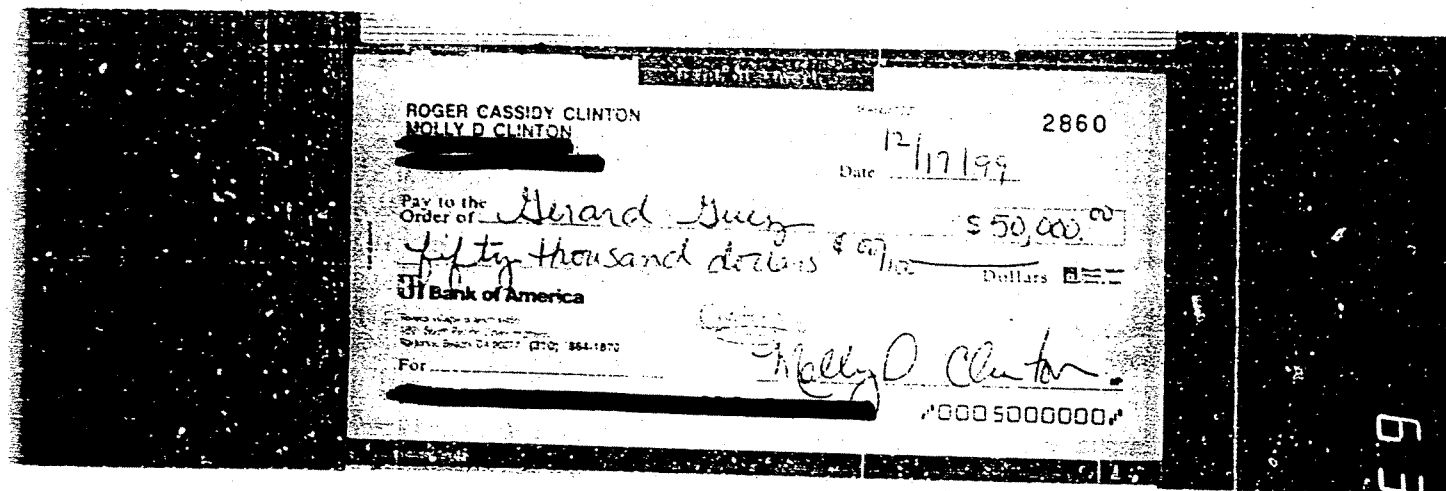
{STX}  
YZYZ  
FROM:/UN-3852  
BANK OF AMERICA CLIENT SVCS 20570  
333 S.BEAUDRY AVE. 18TH FL.  
LOS ANGELES, CA 90027  
TO: /NA-BOFA  
BANK OF AMERICA  
DOMESTIC MONEY TRANSFER  
CONCORD, CA  
DATE:991025

::100 CUSTOMER TRANSFER  
PLEASE PAY

:15 TEST KEY:{TEST:}

:20 SENDERS REF:BA REF940213  
:30 VALUE DATE:991025 25OCT99  
:32 AMOUNT:  
USD 100,000.00 US DOLLAR

:50 ORIGINATOR:



ROGER CASSIDY CLINTON  
 MOLLY D. CLINTON  
 2889  
 Date 11/6/00  
 Pay to the order of Gerard Dwyer \$50,000.00  
 Fifty thousand and 00/100 Dollars  
 Federal Reserve Bank of America  
 1000 500000000  
 Molly D. Clinton  
 000050000000

54059384

PAY TO THE ORDER OF  
 IMPERIAL BANK  
 LOS ANGELES, CA 90008  
 12220144 4  
 VIA DEPOSIT ONLY  
 GERARD DWYER  
 JACQUELINE ROSE  
 28301308  
 0029 01076  
 12220144 4  
 0541660358  
 IMPERIAL BANK  
 LOS ANGELES, CA 90008  
 12220144 4  
 01/26/00  
 106

66-te-01

Bank of America  
Maximizer/Business Money Market/COR  
Withdrawal/Transfer  
NOT NEGOTIABLE

10-27-99

One hundred fifteen thousand seven hundred three and 40/100 DOLLARS

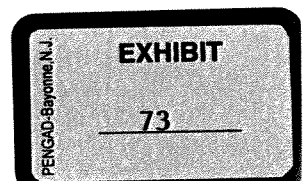
115703.42

Roger C. Clinton

61015664

1560000000  
9200000000

Counsel's Office – Meredith Cabe  
CF 2031  
Printed contents of diskette (pardon lists)  
[no folder, loose diskette in box]



NCIC for Michael Mahoney?

NCIS for Rosario Gambino, [REDACTED], no social security number, incarcerated at Terminal Island, CA

Please provide all information known regarding Kimberly Johnson's incident report for "threatening bodily harm"

Ask DOJ to contact sentencing judge in Diana G. Nelson case?

NCIC: Peter Ninemire, [REDACTED], [REDACTED] what happens if we commute entire federal sentence; is he remanded to state custody???



**1. NCIC Checks**

Michael Mahoney,

Rosario Gambino, [REDACTED], no social security number, incarcerated at Terminal Island, CA

Peter Ninemire, 00/00/00, [REDACTED]

John Bustamente, [REDACTED], [REDACTED]

**2. Follow up questions**

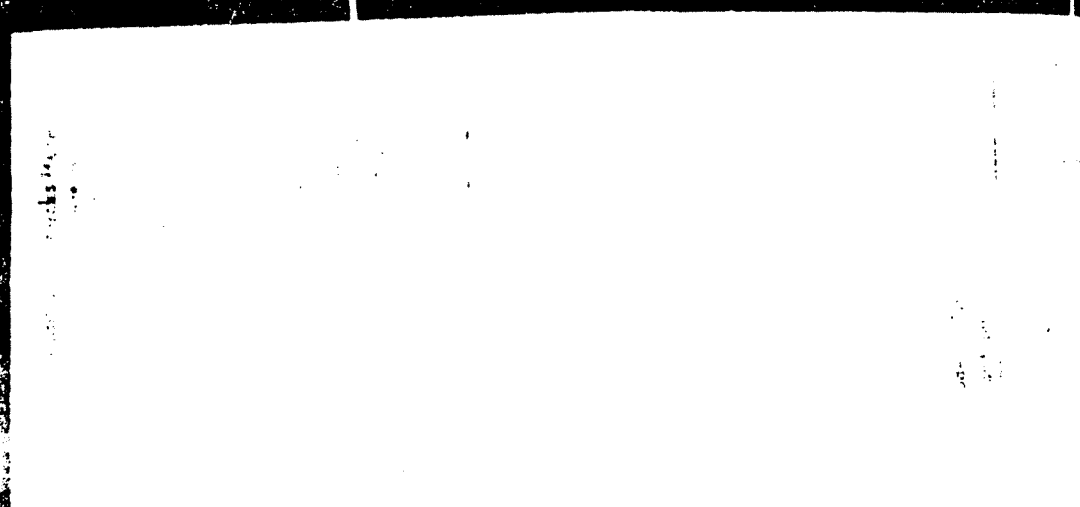
Kimberly Johnson: please provide all information known regarding incident report for "threatening bodily harm"

Diana G. Nelson: Please contact sentencing judge regarding position on commutation.

Peter Ninemire: can you determine what happens if we commute entire federal sentence; is he remanded to state custody???

0030041779

00



1001

INT

10000000/

VERBODEN AFNEMEN  
**First Western**  
 BANK OF CALIFORNIA  
 CROSBY, NEW JERSEY

For **CLM LLC**

Date **8-13-92**

ACCOUNT NO. [REDACTED]

Checks and other items are retained for deposit subject to the terms and conditions of the bank's customer agreement.

	DOLLARS	CENTS
CURRENCY		
COIN		
CHECKS AND OTHERS		
TOTAL OF CHECKS LISTED ON BACK		
TOTAL DEPOSIT	<b>70,000</b>	<b>00</b>

36-700070000000/

\*\*\* REPRINT \*\*\*  
###NORMAL MSG/ACCTG ENTRY###  
{2000} Amount: \$70,000.00  
{3600} Bus Function Code: CTR

\*\*\* FT INCOMING  
BKAMERTEXAS  
FIRST NB CROSSETT  
1000  
D8846705646  
M M FOUNDATION  
5220 SPRING VALLEY STE 300  
DALLAS TX. 75240

### 02 ### FT PROD ###  
{3100} Sender: 311093120  
{3400} Receiver: 082903219  
{1510} Type Code:  
{5000} Originator:

Beneficiary:  
C L M LLC  
19980819L1QFBX4C000150  
980819004597  
08191429FT01  
19980819H2QZA40D00000308191429FT01

{4200} Beneficiary:  
{1520} IMAD:  
{3320} Sender Ref:  
{1110} Timestamp:  
{1120} OMAD:  
#####



Sharon Priest  
SECRETARY OF STATE

# State of Arkansas SECRETARY OF STATE

FILED  
CORPORATIONS DIVISION  
NO. 161953  
98 AUG 14 PM 12:08

SHARON PRIEST  
SECRETARY OF STATE  
STATE OF ARKANSAS  
BY: *[Signature]*

## LIMITED LIABILITY COMPANY FRANCHISE TAX

In order for this limited liability company to receive its annual franchise tax reporting form, please complete and file with the office of the Secretary of State at the time of filing.

*C.L.M. L.L.C*

Limited Liability Company Name as Applied for in Arkansas

*Dickey Morton*

Contact Person

*P.O. Box 158*

Street Address or Post Office Box

*Fountain Hill ARKANSAS 71642*

City, State, Zip Code

*870-853-8503*

Telephone Number

*2070*

Dissolution Date of Limited Liability Company  
(Not Required for Foreign Limited Liability Company)

Note: This tax is due on or before June 1 of the year following filing or qualification in this state.

*[Signature]* *Morton*

Signature (Please include affiliation)



# Arkansas Secretary of State

## Sharon Priest

State Capitol • Little Rock, Arkansas 72201-1094 • 501.682.1010

FILED  
CORPORATIONS DIVISION  
NO. 161953  
98 AUG 14 PM 12:08

SHARON PRIEST  
SECRETARY OF STATE  
STATE OF ARKANSAS

BY Dm

Instructions: File in **DUPLICATE** with the Secretary of State, State Capitol, Little Rock, Arkansas 72201-1094. A copy will be returned after filing has been completed.

PLEASE TYPE OR CLEARLY PRINT IN INK

## ARTICLES OF ORGANIZATION

The undersigned authorized manager or member or person forming this Limited Liability Company under the Small Business Entity Tax Pass Through Act, Act 1003 of 1993, adopt the following Articles of Organization of such Limited Liability Company:

First: The Name of the Limited Liability Company is:

C.L.M. L.L.C.

Must contain the words "Limited Liability Company," "Limited Company," or the abbreviation "L.L.C.," "L.C.," "LLC," or "LC." The word "Limited" may be abbreviated as "Ltd.," and the word "Company" may be abbreviated as "Co." Companies which perform PROFESSIONAL SERVICE MUST additionally contain the words "Professional Limited Liability Company," "Professional Limited Company," or the abbreviations "P.L.L.C.," "P.L.C.," "PLLC," or "PLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co."

Second: Address of registered office of the Limited Liability Company which may be, but need not be, the place of business shall be:

C.L.M. L.L.C.  
717 PINE MANOR DR.  
HAMBURG, AR 71646

Third: The name of the registered agent and the business residence or mailing address of said agent shall be:

Dickey Morton  
[REDACTED]  
[REDACTED]

(a) Acknowledgment and acceptance of appointment **MUST** be signed. I hereby acknowledge and accept the appointment of registered agent for and on behalf of the above named Limited Liability Company.

[Signature]  
Please sign here

Fourth: The latest date (month, day, year) upon which this Limited Liability Company is to dissolve:

6/03/2020

Fifth: IF THE MANAGEMENT OF THIS COMPANY IS VESTED IN A MANAGER OR MANAGERS, A STATEMENT TO THAT EFFECT MUST BE INCLUDED IN THE SPACE PROVIDED OR BY ATTACHMENT:

NO

PLEASE TYPE OR PRINT CLEARLY IN INK THE NAME OF THE PERSON (S) AUTHORIZED TO EXECUTE THIS DOCUMENT.

Dickey Morton

Signature of authorized manager, member, or person forming this Company: [Signature]

LL01 Rev. 9-93

Filing Fee \$50.00